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PATENT

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Miklos Sandorfi

Serial No.: 09/408,429

Filing Date: September 29, 1999

Entitled: MICROPROCESSOR INTERFACE

Docket No: EMC2-032PUS (formerly 07072-086001)

Group Art Unit: 2186

Examiner: D. Tran

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RESPONSE

Commissioner for Patents
Washington, D.C. 20231

This is in response to the Office Action mailed March 12, 2002 for the above-identified
patent application.

Please amend the above-identified application as follows:

In The Claims:

A clean set of claims is presented below, a comparison of such claims with the previous claims
as attached.



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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/408,429	
	Filing Date	September 29, 1999	
	First Named Inventor	Miklos Sandorfi	
	Group Art Unit	2186	
	Examiner Name	D. Tran	
Total Number of Pages in This Submission	14	Attorney Docket Number	EMC2-032PUS

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return-receipt postcard
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